Nearly two-thirds of the time when Asian beneficiaries call a health plan, they fail to reach someone who speaks their native language.

Background

Asian American older adults are one of the fastest growing populations in the country. There are over one million Asian Americans who are 65 and older and this population is expected to increase to about 7.5 million by 2050.¹ Most of these seniors immigrated to this country as adults. Over two-thirds of all Asian American seniors do not speak English well and one-half of Korean, Chinese and Vietnamese seniors live in a household where English is not spoken.² For them, access to health care information, benefits and services is especially difficult.

Certain Asian ethnic groups also have high rates of poverty among older adults. According to the U.S. Census Bureau, one in six Asian Americans 65 years and older (15.5%) live in poverty compared to one in 15 (6.6%) non-Hispanic White older adults.³

NAPCA provides the only national toll-free Asian language Helpline created to assist limited English speaking Chinese, Korean and Vietnamese seniors. The NAPCA Helpline enables limited and non-English speaking seniors who are seeking information and assistance to avoid English-only operators and automated phone menus by having separate phone lines dedicated to each language. Callers receive counseling directly in their desired language by bilingual and bicultural subject matter experts.
Due to these high poverty rates, many Asian elders are dependent on Medicare, Medicaid and other public benefits. About 34 percent of Asians over the age of 65 rely solely on Medicare coverage for health care, compared to only 29 percent of Whites. For many older Asian adults who cannot afford private insurance, the lack of Medicare, Medicaid and other benefits prohibits them from accessing health care services.

Limited English proficiency for many Asians is also a major barrier to accessing health care benefits and services and to acquiring information about health issues. There are particularly high rates of limited English proficiency among Chinese (75%), Korean (78%), and Vietnamese (83%) populations 65 and older (Figure 1). The lack of information and assistance available to Asian elders in their native languages is a significant barrier to accessing benefits, such as Medicare or Medicaid, which are crucial to the health of many Asian elders.

The National Senior Citizens Law Center conducted a 2007 study on limited English speaking beneficiaries eligible for both Medicare and Medicaid. They found that nearly two-thirds of the time when a non-English speaker called, they did not reach an individual who spoke their language. Health plans were only able to serve Asian language speakers in their primary language five to forty-nine percent of the time. This study showed that customer service providers that assist with health plan inquiries have failed to adequately comply with the law requiring Medicare prescription drug plans to provide multilingual services for limited or non-English speaking beneficiaries.

The NAPCA Helpline

Limited and non-English speaking seniors occasionally receive translated information from government agencies and national community organizations, but have nowhere to turn when they have additional questions or need help enrolling or applying for benefits or programs. Local community organizations might not have either the language capacity or subject matter expertise to provide in-language counseling and assistance. As a national service, the NAPCA Helpline “closes the loop” between large-scale
The NAPCA Helpline: A Valuable Resource for Asian Seniors

NAPCA Helpline Stops Pharmacy from Overcharging Couple for Medication

The NAPCA Helpline assisted Mrs. Lee* from San Jose, CA, to enroll in a prescription drug plan that has no deductible, and lists her cholesterol medication as a Tier 1 drug with no copay. However, when her husband went to a local pharmacy to fill the prescription, they were charged $90 for her drug. The pharmacy supervisor told him that they had to meet the deductible to avoid paying the copay. Mrs. Lee’s husband was upset and left the pharmacy without the medicine because they could not afford it.

They called the Helpline again for assistance. Helpline worked with the insurance company to uncover a billing error from the pharmacy, and because of Helpline’s advocacy, Mrs. Lee got her medication to lower her cholesterol.

*Name was changed to protect the caller’s identity

outreach efforts and limited English speaking seniors who need additional information and assistance.

The NAPCA Helpline is a free service available to limited and non-English speaking Chinese, Korean and Vietnamese seniors nationally. The majority of callers are from California (52%) and Washington state (9%), New York (8%), Virginia (5%), Texas (4%), Illinois (3%), and Maryland (3%) (Figure 2). Fifty-eight percent of Helpline callers speak Mandarin or Cantonese, 21% speak Korean, and 18% speak Vietnamese (Figure 3).

Helpline is an innovative, award-winning service for limited and non-English speaking elders. Helpline has received awards from the American Society on Aging and the U.S. Administration on Aging. The Helpline also received recognition from President George W. Bush, the U.S. Secretary of Health and Human Services, and senators and congressmen from across the country. In June 2009, the Helpline won the Seattle Human Services Coalition’s “Innovative Program Award.”

Figure 2: NAPCA Helpline Incoming Calls by State (2011)

Figure 3: Helpline Calls by Language

- 58% Chinese
- 21% Korean
- 18% Vietnamese

0% <1% 1-4% 5-10% >10%
The NAPCA Helpline Assists Asian Seniors on a Wide Range of Issues

Health care and health benefits information, such as eligibility requirements, enrollment periods, and benefits coverage for public senior benefits programs, are complex and can be confusing to seniors. The NAPCA Helpline commonly fields inquiries on topics ranging from Medicare, Medicaid and Social Security eligibility requirements and enrollment. Helpline has also informed and assisted limited English speaking seniors about other important information and programs, such as the transition to Digital TV. The NAPCA Helpline assists seniors thoroughly and completely, talking them through an issue from beginning to end. Helpline staff members go above and beyond what is required to resolve an issue or answer a question on a senior’s behalf.

Medicare Information and Enrollment Support

NAPCA established the Helpline to assist limited and non-English speaking Chinese, Korean, and Vietnamese seniors to get the most out of their Medicare coverage. This includes not only helping seniors with Medicare, but also ensuring that qualified seniors were accessing Medicare assistance programs like the Low-Income Subsidy and the Medicare Savings Program.

Since its creation, NAPCA has fielded over 100,000 Helpline calls. Of these, Helpline staff assisted over 7,000 elders to evaluate their Medicare prescription drug plans and assisted over 1,500 seniors to apply and enroll in Medicare’s Low-Income Subsidy (LIS). The Helpline currently receives

“…You and your center helped us get Medicare Part D. Each month we can save some money. It is very important to us in our senior years. Please accept our deepest appreciation and thanks…”

— Vietnamese senior, Philadelphia, PA

NAPCA Helpline by the Numbers

Since 2005:

- Received over **100,000** calls
- Assisted over **7,000** seniors to evaluate their Medicare Part D plan
- Enrolled over **3,000** seniors in a Medicare Part D plan
- Assisted over **1,500** apply for the Medicare Low-Income Subsidy
- Averages **10,000** incoming calls per year

…You and your center helped us get Medicare Part D. Each month we can save some money. It is very important to us in our senior years. Please accept our deepest appreciation and thanks…”

— Vietnamese senior, Philadelphia, PA
about 10,000 incoming calls annually. In 2011, the Helpline counseled over 750 seniors using Medicare’s Prescription Drug Plan Finder and assisted nearly 200 seniors to submit applications for the Low-Income Subsidy.

NAPCA conducted a study on cost savings during Medicare Part D Open Enrollment Periods 2010 and 2011. From that study, we determined that Helpline saved callers who enrolled or switched plans during these Open Enrollment Periods about $178,500 for plan year 2012 and nearly $299,000 for plan year 2011. This was, on average, over $800 per person in 2012 and over $1,000 per person in 2011. We also found that Helpline assisted seniors to save an average of $1,678 per person in 2011 and $813 per person in 2012 when they were able to successfully enroll in the Medicare Low-Income Subsidy. Helpline assists Asian seniors to save money on their prescription drugs so they do not have to choose between their health and other basic necessities, such as food, shelter or heat.

NAPCA also distributes important senior benefit information materials for Asian American and Pacific Islander (AAPI) seniors through the Helpline. In 2011, NAPCA produced and translated two Medicare informational handbooks into Chinese, Korean, Vietnamese, Khmer (Cambodian) and Samoan. The handbooks concisely describe eligibility and services covered by Medicare and also describe programs that are available to help pay for health care and other living expenses. NAPCA has distributed over 6,000 of these booklets in Chinese, Korean, Khmer (Cambodian), Samoan, and English.

Without the NAPCA Helpline’s assistance, linguistic and cultural barriers would prevent thousands of Asian elders from enrolling in Medicare and other public programs.

**NAPCA Helpline Saves Senior Almost $4,000**

Mr. Nguyen* was enrolled in a Medicare Part D plan that did not cover all of his medications, and would have cost him over $4,200 annually. Helpline assisted him to apply for the Low-Income Subsidy and change his prescription drug plan. With LIS and his new prescription drug plan, Mr. Nguyen’s annual medication costs were reduced to $268, saving him nearly $4,000 for the year.

*Name was changed to protect the caller’s identity*
Social Security and Other Benefits Counseling

In addition to Medicare, Helpline also provides information and support on Social Security and other benefit programs. Helpline educates callers about Social Security retirement benefits eligibility requirements and answers general questions on various topics, such as spousal benefits and early retirement. On occasion, Helpline also contacts the Social Security Administration on behalf of callers to resolve issues with retirement benefits. The NAPCA Helpline received almost 800 calls on Social Security retirement benefits over the past two years (2011 and 2012).

Transition to Digital Television (2009)

Television programming in Asian languages is an important source of information to Asian seniors. NAPCA’s Helpline, in collaboration with community partners, assisted hundreds of limited and non-English speaking Asians to maintain their television service during the transition to digital TV in 2009. When Congress passed legislation requiring television stations to start broadcasting exclusively using digital signals, people with antenna televisions needed to purchase cable service or a converter box to ensure their televisions would continue to work. Helpline raised awareness of the digital TV transition through media and community outreach. NAPCA also produced an instructional video on how to install converter boxes. Helpline staff assisted seniors to apply for government coupons to purchase converter boxes and provided technical support for installing the hardware.

Access to public benefits is important to low-income seniors who often have to make difficult decisions between paying for medications, food, and other household expenses.

NAPCA Helpline’s Exceptional Customer Service and Advocacy Resolves Medicare Mistake

Mrs. Wu*, who had the Low-Income Subsidy (LIS), called the NAPCA Helpline because her prescription drug plan was going to start collecting monthly premiums from her. Helpline found out that Mrs. Wu’s LIS was cancelled because she did not complete the LIS review. When trying to help her re-apply for LIS and review her prescription drug plan, Helpline also discovered that her Medicare coverage was terminated because the Social Security Administration (SSA) mistakenly reported her as deceased.

Even after the error was reported to SSA, Helpline staff found that Mrs. Wu was still not in the Medicare system. Helpline staff made several calls to Medicare and SSA to ensure that her information was correctly updated so that she could apply for LIS and enroll in her prescription drug plan before the Open Enrollment Period ended. After a month of back and forth, and Helpline’s tireless advocacy, Mrs. Wu was able to re-enroll in the prescription drug plan of her choice on time, enabling her to get her medications.

*Name was changed to protect the caller’s identity
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Every year, as needed, Helpline reviews [Medicare] Part D and helps people to switch [prescription drug] plans. When others told me that their prescription was not covered, I called NAPCA. Helpline solved the problem by switching their drug plans.

— Chong Hun Cha, Columbia, MD (Korean)

Senior Uses Helpline to Assist Others

Mr. Chong Hun Cha has used the NAPCA Helpline since 2006, when Helpline staff helped him first enroll in a Medicare Part D prescription drug plan. Helpline assisted Mr. Cha to understand Medicare and to review and change his prescription drug plans when needed. Now, he helps other Korean seniors in his community who have problems with their drug plans by calling the NAPCA Helpline on their behalf.

NAPCA Informs and Educates AAPI Elders

NAPCA uses a two-pronged approach to provide information, education and outreach among AAPI communities. First, NAPCA raises awareness through ethnic media, our Voices newsletters, and by partnering with our network of over 600 AAPI-serving community-based organizations. Second, NAPCA provides access to important benefits and services by providing information and assistance in-language and in a culturally appropriate manner through the Helpline.

The NAPCA Voices newsletter regularly publishes informational articles for seniors on important topics such as the Medicare Part D Open Enrollment Period, flu shot reminders, and preventive services covered by Medicare. NAPCA mails its Voices newsletter, which is published in Chinese, Korean, Vietnamese, and English, to nearly 30,000 individuals and AAPI-serving community providers.

Seniors also write letters to the NAPCA Helpline, primarily with their questions on Medicare Part D, Low-Income Subsidy and other senior benefits. Helpline staff responds to these letters directly in their own language, and writes articles with questions and answers for the “Ask NAPCA” newspaper column. The column is published in Chinese, Korean, and Vietnamese both locally and nationally. “Ask NAPCA” allows the Helpline to reach a broad audience with answers to questions that many limited and non-English speaking seniors have about senior benefits and other topics. In 2011, the NAPCA Helpline received 214 letters from column readers.

In addition, NAPCA and Helpline staff inform seniors across the nation about important issues, such as Medicare eligibility, by presenting at local community-based organizations and events. NAPCA Helpline staff members have also been interviewed by ethnic media, such as Asian TV programming. These media and community activities work in partnership with the Helpline to provide comprehensive information and assistance to AAPI seniors.
Conclusions

The NAPCA Helpline breaks down linguistic and cultural barriers that would otherwise prevent Asian American elders from enrolling in Medicare and other public programs. Helpline informs and educates limited English speaking seniors on a broad range of important issues. The Helpline also assists primarily low-income Asian seniors to apply for and get the most from their senior benefits. Helpline prevents low-income Asian seniors from having to make difficult choices between getting prescriptions or medical care they need and paying for other basic living expenses. Thus, NAPCA’s Helpline contributes to the health and well-being of low-income Asian seniors by serving them in-language and in a culturally appropriate manner.

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Endnotes


